

Delaware Health and Social Services



Division of Long Term Care Residents Protection

Plans of Correction

Presentation Date: January 7, 2014

Training

For

Nursing

Facilities



Surveyor & Provider



Requirements

For
POCs

Understanding HCFA-2567/Summary Sheets

If the provider does not comply with one or more applicable requirements, the CMS-2567 the Survey Summary Sheets must include the specific regulatory citations of noncompliance.



The CMS-2567 and the State Survey Summary Sheets should be written in a concise, specific and easy-to-understand fashion.

Provider Requirements Cont.

- Include dates when a corrective action will be completed. These corrective action completion dates must be acceptable to the state. If the plan of correction is **unacceptable** for any reason, the State will notify the facility in writing. If the plan of correction is acceptable, the State will notify the facility by e-mail, etc. Facilities should be cautioned that they are ultimately responsible for their own compliance. **The plan of correction will serve as the facility's allegation of compliance.**



Acceptable POC

Measures such as the requirements for a plan of correction emphasize the ability to achieve and maintain compliance leading to improved quality of care. In order for a POC to be accepted it must:

Contain elements detailing how the facility did correct the deficiency as it relates to the individual.

- Indicate how the facility will act to protect residents in similar situations.
- Include the measures the facility will take or the systems it will alter to ensure that the problem does not recur.
- Indicate how it will be monitored to make sure that solutions are sustained.
- Provide dates when corrective action will be completed.



*Required
Four
Elements for
a POC*

Provider Requirements

The Plan of correction must:

- #1
- Address how corrective action will be accomplished for those residents found to have been affected by the deficient practice.

Provider Requirements.

The Plan of correction must:

#2

Address how the facility will identify other residents having the potential to be affected by the deficient practice.

Plan of Correction

- #3
- Address what measures will be put into place or procedural changes made to ensure that the deficient practice will not recur.

Plan of Correction

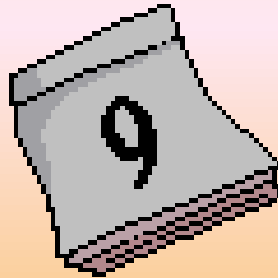
•#4

- Indicate how the facility plans to monitor its performance to make sure that solutions are sustained. The facility must develop a plan for ensuring that correction is achieved and sustained. This plan must be implemented, and the corrective action evaluated for its effectiveness. The plan of correction is integrated into the quality assurance system.

POC

- If a submitted POC does not adequately address all of these points, it would **not** be acceptable. In addition, the corrective action completion dates must be acceptable to the state. **The plan of correction will serve as the facility's allegation of compliance.**
- If an acceptable POC is not submitted the State Survey agency may pose to the RO/SMA that remedies be imposed immediately within applicable notice.

Required Actions



1. By no later than the 10th working day after the last day of the standard survey, the State Agency must forward to the provider the Form CMS-2567, and a letter notifying the provider, and if applicable, the statement of isolated deficiencies which cause no harm and potential for minimal harm.



Required Actions

2. By the 10th calendar day after the provider receives the Form CMS-2567, the provider submits its POC to the SA with the four core elements.
3. If the provider does not submit an acceptable POC by the 10th day after it receives the Form CMS-2567, the SA notifies the provider that it is recommending to the RO/SMA that it impose remedies effective as soon as notice requirements are met.

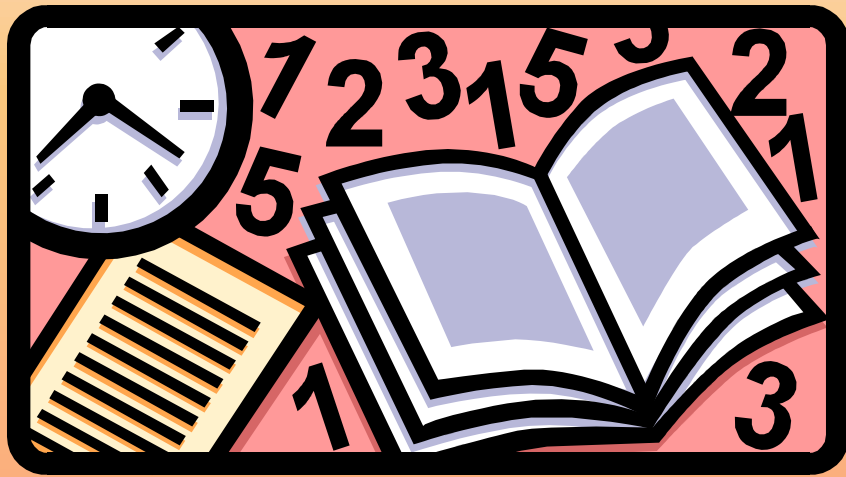
Required Actions

4. The State agency is required by the Regional office to notify CMS by the **60th day when a facility's POC is not acceptable.**



5. Upon receipt of a credible allegation of compliance (can be the POC) the state agency will notify the provider.

Writing the Plan

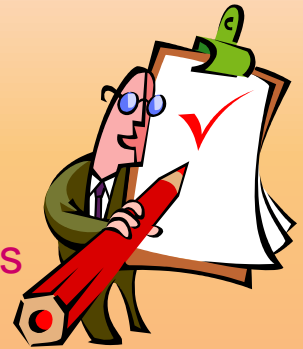


of Correction

Writing the Plan of Correction Cont.

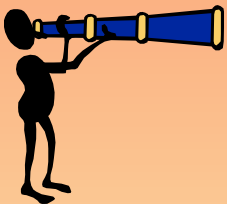
Sample Corrective Actions

- Performing new assessments
- Seeking resident council input
- Revising/updating care plans
- Conducting resident/family interviews
- Performing in-service training
- Increasing staffing
- Writing/revising policies and procedures
- Purchasing ancillary services/products
- Obtaining consulting assistance



Sample Monitoring Activities

- Observing staff performance
- Conducting resident/family interviews
- Conducting floor rounds
- Performing mock surveys
- Completing checklists
- Performing quality assurance surveys
- Reviewing reports
- Reviewing inventory levels
- Auditing records



Writing the Plan of Correction Cont.

Write statements in this order:

How will corrective action be accomplished for those residents found to have been affected by the deficient practice?

(Title of responsible corrector) **will implement corrective actions for residents** (insert resident identifier numbers) **affected by this practice**, including:

(List specific corrective actions for each resident).

How will the facility identify other residents having the potential to be affected by the same deficient practice?

(Title of responsible corrector) **will assess residents having the potential to be affected by this practice**, including:

(List specific corrective actions for other residents at risk).

1

2

Writing the Plan of Correction Cont.

Write statements in this order:

What measures will be put into place or systemic changes made to ensure that the deficient practice will not recur?

(Title of responsible corrector) **will implement measures to ensure that this practice does not recur**, including:
(List specific corrective actions for system changes)

3

How will the facility monitor its corrective actions to ensure that the deficient practice will not recur?

(Title of responsible corrector) **will monitor corrective actions to ensure the effectiveness of these actions**, including:
(List specific corrective actions for monitoring activities)

4



The End